

Please Return to:
City of Gahanna
Dept of Parks & Recreation
200 S. Hamilton Rd
Gahanna, Oh 43230
614.342.4250



Important Note: Completing a scholarship application does not guarantee a spot in a program for your child.

2020 Youth Scholarship Application

Scholarship eligibility is determined by participation in the Gahanna-Jefferson Free/Reduced lunch program. Once eligibility is confirmed, a maximum of 2 weeks of “full day” Summer Camp may be awarded for each participant, per calendar year.

	<u>Covered by Scholarship</u>	<u>Owed by Participant</u>
Free Lunch Program	75% Program Fees	25% Program Fees + \$30 Admin fee
Reduced Lunch Program	50% Program Fees	50% Program Fees + \$30 Admin fee

Parent/Guardian's Name: _____
First Middle Last

Child's Name: _____
First Middle Last

Child's Date of Birth: ____/____/____ School Attending: _____
Day Month Year

Address: _____
Street Address Apt. # City State Zip Code

Home Phone: _____ Cell Phone: _____

Email Address: _____

Does your family currently qualify for the Free or Reduced Lunch Program? ☐ Free ☐ Reduced

Has the child received a scholarship for Gahanna Parks & Recreation programs in previous years? ☐ Yes ☐ No

For summer camp scholarship consideration, how many weeks of assistance are you requesting? ☐ 1 wk ☐ 2 wks

Scholarship Application Terms and Guidelines

- 1) A copy of the letter proving participation in the Free/Reduced Lunch Program must be provided **at the time of application**. Incomplete applications will not be considered.
- 2) Please provide remaining payment by credit card, cash, or check made payable to: City of Gahanna. *Payment will not be deposited until program registration has been confirmed.*
- 3) All scholarships are subject to availability of funds and class space. The scholarships are awarded on a first-come, first-serve basis for eligible recipients.
- 4) Participant must attend the program for which they receive scholarship funds in order to be eligible to receive funds the following year.

I, _____, certify that the information provided above and enclosed is correct.
Parent/Guardian - Print Name

Parent/Guardian Signature _____

Date _____

Thank you to the Gahanna Parks & Recreation Foundation for support of the Gahanna Parks & Recreation Scholarship Program.



For Staff Use Only:

Date Rec'd: _____

Approved by: _____

Amt Approved: _____

Date Approved: _____